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Patent and Trademark Office**DECLARATION FOR
UTILITY OR DESIGN
PATENT APPLICATION**

Declaration OR Declaration
☒ Submitted ☐ Submitted after
 with Initial Filing Initial Filing

Attorney Docket Number 960296.95581 P99017US

First Named Inventor Arnold E. Ruoho

COMPLETE IF KNOWN

Application Number 09/389835

Filing Date 09/03/99

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BACTERIORHODOPSIN/ G PROTEIN-COUPLED RECEPTOR CHIMERAS

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YY)

as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign applications numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
09/389835	09/03/99	

DECLARATION

Page 2

I hereby claim benefit under Title 35, United States Code §120 of any United States application(s), or §365(C) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT international application in the manner provided in the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and all continuation and divisional applications based thereon, and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name Customer Number or label

OR

☒ List attorney(s) and/or agent(s) name and registration number below

Name	Registration Number	Name	Registration Number
Thad F. Kryshak	19,428	Gregory A. Nelson	30,577
Neil Hamilton	19,869	Keith M. Baxter	31,233
Thomas W. Ehrmann	20,374	John D. Franzini	31,356
Barry E. Sammons	25,608	Joseph W. Bain	34,290
J. Rodman Steele	25,931	Robert J. Sacco	35,667
Nicholas J. Seay	27,386	Jean C. Baker	35,433
George E. Haas	27,642	David G. Ryser	35,407
Michael J. McGovern	28,326	Bennett J. Berson	37,094
Carl R. Schwartz	29,437	Michael A. Jaskolski	37,551
		Jill A. Fahrlander	42,518

☐ Additional attorney(s) and/or agents named on a supplemental priority sheet attached hereto

Please direct all correspondence to ☐ Customer Number or label

OR ☒ Fill in correspondence address below

Name **Fahrlander, Jill A.**

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Telephone **608/251-5000**

Fax **608/251-9166**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Name of Sole or First Inventor:

A petition has been filed for this unsigned inventor

Given Name **Arnold** Middle Initial **E.** Family Name **Ruoho** Suffix **e.g. Jr.**

Inventor's Signature

Arnold E Ruoho

Date

10/8/99

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State

WI

Country

US

Citizenship

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11/4/99**

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53711

Country

US

Applicant Authority

☐ Additional inventors are being named on supplemental sheet(s) attached hereto

Please type a plus sign (+) inside this box ☐

DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet																		
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor																		
Given Name	Michael					Middle Initial	K.		Family Name	Sievert					Suffix e.g. Jr.													
Inventor's Signature	<i>Michael K Sievert</i>										Date	10/9/99																
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Post Office Address																												
City					Madison					State		WI		Zip		53705			Country			US			Applicant Authority			
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor																		
Given Name	Mark					Middle Initial	P.		Family Name	Krebs					Suffix e.g. Jr.													
Inventor's Signature	<i>Mark P Krebs</i>										Date	10/11/99																
Residence: City					Madison					State		WI		Country			US			Citizenship			US					
Post Office Address					10-B University Houses 2002 Chamberlain Ave.																							
Post Office Address					<i>MPK 10/11/99</i>																							
City					Madison					State		WI		Zip		53705			Country			US			Applicant Authority			
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor																		
Given Name	Andrew					Middle Initial	H.		Family Name	Geiser					Suffix e.g. Jr.													
Inventor's Signature	<i>Andrew H. Geiser</i>										Date	10/11/99																
Residence: City					Madison					State		WI		Country			US			Citizenship			US					
Post Office Address					626 Langdon Street #004 933 W. JOHNSON #39																							
Post Office Address					<i>10/11/99</i>																							
City					Madison					State		WI		Zip		53705 53715			Country						Applicant Authority			
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor																		
Given Name						Middle Initial			Family Name						Suffix e.g. Jr.													
Inventor's Signature											Date																	
Residence: City										State				Country						Citizenship								
Post Office Address																												
Post Office Address																												
City										State				Zip					Country									

Additional inventors are being named on supplemental sheet(s) attached hereto

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27).

NAME: _____
ADDRESS: _____

☐ INDIVIDUAL

☐ SMALL BUSINESS CONCERN

☐ NONPROFIT ORGANIZATION

NAME: _____
ADDRESS: _____

☐ INDIVIDUAL

☐ SMALL BUSINESS CONCERN

☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING Carl E. Gulbrandsen
TITLE IN ORGANIZATION Director of Patents and Licensing
ADDRESS OF PERSON SIGNING Wisconsin Alumni Research Foundation
P.O. Box 7365, Madison, WI 53707-7365

SIGNATURE  Date 10/1/99



Attorney's Docket No. 960296.95581

Applicant or Patentee: Arnold E. Ruoho et al.

Serial or Patent No.: 09/389835

Filed or Issued: 9-3-1999

For: BACTERIORHODOPSIN/G PROTEIN-COUPLED RECEPTOR CHIMERAS

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 CFR 1.9(f) and 1.27(b)) - INDEPENDENT INVENTOR**

As a below-named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled BACTERIORHODOPSIN/G PROTEIN-COUPLED RECEPTOR CHIMERAS

described in

- ☐ the specification filed herewith.
- ☒ application serial no. 09/389835, filed 9-3-1999
- ☐ patent no. _____, issued _____

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☐ no such person, concern, or organization
- ☒ persons, concerns or organizations listed below*

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

NAME: Wisconsin Alumni Research Foundation

ADDRESS: P.O. Box 7365, Madison, WI 53707-7365

- ☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☒ NONPROFIT ORGANIZATION

NAME: _____

ADDRESS: _____


- ☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Arnold E. Ruoho

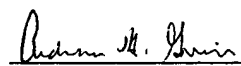
Name of inventor


Signature of inventor

Date 10/8/99

Andrew H. Geiser

Name of inventor


Signature of inventor

Date 10/12/99

Michael K. Sievert

Name of inventor


Signature of inventor

Date 10/8/99

Mark P. Krebs

Name of inventor


Signature of inventor

Date 10/11/99



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